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St. Bartholomew's Hospital Journal,

AUGUST 14th, 1896.

"Æquam memento rebus in arduis
Servare mentem."—*Horace,* Book ii, Ode iii.

The Conflict of Medicine with the Small-Pox.

Being the Mid-Sessional Address to the Abernethian Society, delivered on Thursday, July 9th, 1896.

By SAMUEL GEE, M.D., F.R.C.P.

ON May 14th, 1796, Dr. Edward Jenner inoculated his first patient for the cow-pox. When you asked me to give such an address as might in some sort celebrate the hundredth anniversary of that event, you doubtless knew that my practical knowledge of vaccination is very small. When I was first elected assistant physician at this hospital, the governors charged Dr. Church and me with the duty of vaccinating all children who were brought to us for that purpose. In this way I learned the little I know about the subject. But the competition of medical men outside the hospital stopped our supply of children in the course of no great length of time; and now students who wish to learn vaccination have to go elsewhere. I mention these facts because I have little taste for retailing other men's opinions which I have no means of putting to the test for myself. Vaccination is a matter which seldom crosses my mind; so that I hope you will not have expected that I shall discuss all the debatable points with which the topic of vaccination teems. Nor shall I repeat, at any length, the oft-told tale of Jenner's life and his discovery. I shall take leave to widen the boundaries of my theme, and to occupy the time at my disposal this evening by a sketch of the history of the conflict of medicine with the small-pox.

Let us take medicine in its broadest sense, and accept Plato's definition that medicine is the science of health: not only the science of curing disease, but also the science of preserving health in general (what is called hygienics), and the science of preserving health from the attack of special diseases (or prophylactics).

Turning now to the consideration of small-pox, I must remark in the first place that it is commonly assumed that the poison has but one source, namely, contagion from man. Jenner was of a different opinion, as I shall show hereafter. But assuming that contagion from man is now the only source of the disease, we may, with reason, ask whether history can tell us when the morbid poison first appeared in the world. All that we know is that about a thousand years ago a Persian named Rhazes wrote a book upon small-pox and measles, the most important work which the Arabian school of medicine has left us. Rhazes' book is written in Arabic: some have supposed that the disease first arose in Arabia, and one reason for the supposition is that so many contagious diseases have travelled westward, with the sun; as Bishop Berkeley said, "Westward the course of empire takes its way." Epidemic cholera certainly comes to us from the East; so does influenza, and the plague. Diphtheria used to be called the Egyptian disease; possibly its original habitat was the valley of the Nile, as the valley

of the Ganges seems to breed cholera, and as influenza was thought to have been caused by inundations of the Yellow River in China. Only one English disease that I know of, has been supposed to come to us from the West; but this cannot be proved; and that true American disease, the yellow fever, has never been able to settle on this side of the Atlantic. Concerning the fountain head of the small-pox poison we know nothing at all, nor do we know when it made its first appearance in England.

In an Anglo-Saxon book on medicine, called *Læce Boc*, written about the year 950, reference is made to a disease called póc adl or pustular disease, which may or may not be a name for variola. But in the *Compendium Medicinæ* of Gilbertus Anglicus, written three hundred years later, or about 1250, there is a chapter upon variolæ and morbilli, which were, no doubt, our small-pox and measles. About sixty years later, John of Gaddesden wrote his book called *Rosa Medicinæ*, which I mention because the treatment which he recommends for small-pox has become famous. A red scarlet should be taken,—scarlet is a Persian word which originally signified not a colour, but some kind of costly thin cloth,—I say he recommends that a red scarlet be taken, or any other red cloth, and that the variolous patient be entirely wrapped up in it. He goes on to say that he thus treated a son of the most noble king of England, and that he made everything round the bed to be red, and that it is good treatment, and that he cured his patient without any traces of the variolæ. The king was Edward I, and the son is supposed by Dr. Norman Moore to have been Thomas of Brotherton. For this method of treatment, John of Gaddesden has been held up to ridicule or worse; Sir Thomas Watson fears that he was a very sad knave: but there is no evidence that John of Gaddesden was a knave, or that he invented this special method of treatment, which turns out to be not at all ridiculous. Totally to exclude the rays at the violet end of the solar spectrum from acting upon the skin is said to have the remarkable effect of preventing pitting in small-pox, and this is just what Gaddesden tells us he succeeded in doing—"I cured him without any vestiges of the pocks." Many physicians during the last few years have treated variolous patients by red light, and you may read an account of the results in the *British Medical Journal* for December 7th last year.

Dr. Norman Moore tells me that in a manuscript copy of the *Breviarium Bartholomæi*, compiled by John Mirfield, a canon regular of St. Austin in the priory of St. Bartholomew in West Smithfield, and written about 1387 for the hospital of St. John the Baptist attached to the Abbey of Abingdon, a manuscript which is now in Pembroke College, Oxford, on fol. 43a, after the heading "De variolis et morbilis" are written the words "*i.e.* smal pockes." This is the earliest known use of the term small-pox.

In what year soever the disease was brought among us, it became in course of time a dreadful scourge. I suspect that it reached its highest degree of virulence in the seventeenth century; at least the literature of that period teems with allusions to small-pox. Even the poets could not avoid the disgusting theme. If they wished to bewail the death of a friend, in all probability he died of the small-pox. Dryden wrote elegies upon two of its victims. The first was Lord Hastings, who died in 1649 at the age of 19. The poet was still younger, and he had not yet sacrificed to the Graces. Lord Hastings being—

> "Replenished then with such rare gifts as these,
> Where was room left for such a foul disease?
> Was there no milder way than the small-pox?
> The very filthiness of Pandora's box."

Mrs. Anne Killigrew died of variola in 1685 at the age of 25, and she attained the honour of being celebrated by the same poet in much nobler verses. Mrs. Katherine Phillips, "the matchless Orinda," died of small-pox in 1664 at the age of 33; she was lamented by Cowley. In 1675, Oldham devoted an ode of extraordinary length to the memory of his friend, Mr. Charles Morwent, who was carried off by small-pox. These instances occur to my mind at once. Writers of a satirical turn condoled with ladies upon the sad loss of beauty which ensued when they escaped with life from the dreadful pest. Verses were written "Upon a gentlewoman whose nose was pitted with the small-pox," and so on. Three powerful monarchs underwent small-pox at this time: Louis XIV of France, Charles II of Spain, and Charles II of England. Charles II's brother, Henry Duke of Gloucester, died of the disease. No doubt many of you remember Macaulay's account of the death of Queen Mary, wife of William III. She "had during two or three days been poorly; and on the preceding evening grave symptoms had appeared. Sir Thomas Millington, who was Physician-in-Ordinary to the King, thought she had the measles. But Radcliffe, who, with coarse manners and little book learning, had raised himself to the first practice in London, chiefly by his rare skill in diagnostics, uttered the more alarming words, small-pox. That disease, over which science has since achieved a succession of glorious and beneficent victories, was then the most terrible of all the ministers of death. The havoc of the plague had been far more rapid; but the plague had visited our shores only once or twice within living memory; and the small-pox was always present, filling the churchyards with corpses, tormenting with constant fears all whom it had not yet stricken, leaving on those whose lives it spared the hideous traces of its power, turning the babe into a changeling at which the mother shuddered, and making the eyes and cheeks of the betrothed maiden objects of horror to the lover."

The poor Queen was only 33 years old: she died of hæmorrhagic small-pox on the eighth day.

No wonder that those who had never suffered from the

disease lived in a perpetual terror, of which we have no experience. Take this instance: "You remember the Scriblerus Club of Queen Anne's time, and their wonderful researches among the monkeys of Ethiopia. But the usual journeys of the club were in a narrower circle; and upon one occasion they resolved to walk from London to the seat of Lord Bathurst, near Twickenham. Soon after they had started, Swift, whose powers of foot were large, pushed on before his comrades, with the intention of securing the best bed for himself. But his design miscarried; for Parnell, by borrowing a horse and taking a different road, outstripped even the stride of Swift. Arriving at the house Parnell consulted Lord Bathurst as to the likeliest method of defeating the selfish traveller. Now, as it happened, Swift never had the small-pox, and was especially afraid of it, for not one in a thousand escaped the infection. This fact solved the difficulty. Swift was no sooner seen advancing rapidly than a servant hastened out to meet him, and communicate the disastrous news that the disease which he most dreaded was making fierce ravages in the family; but a special message was added that Swift would be provided with a bed in a summer-house in the garden, and with a cold supper, which repast was accordingly sent him. Meanwhile his companions were feasting joyously indoors; but presently relenting, they released their brother from his exile, on a promise never to offend in the matter of beds again."

Such was the small-pox two hundred years ago: let us now inquire how our forefathers treated the disease. I turn to a translation of Riverius' *Practice of Physic* published in London in 1668, and I read as follows: "The cure of the small-pox is performed in the satisfaction of four indications. Whereof the first consists in the evacuation of the peccant humours; the second in assisting the motion of nature, or helping to expel the pox; the third in the opposition of the malignant and venomous quality; the fourth in correction of symptoms. First, that the patients be kept in a warm room, to the end their pores may be kept open, and the breaking out of the small-pox may there be furthered. Therefore they must be kept in a chamber well shut, which the cold air must in nowise enter into. And for the same cause they must be moderately covered with clothes. Many are also wont to keep an ewe or wether in the chamber or on the bed," and so on, for time will not allow me to enumerate all the other details of treatment,—the alexipharmacs, the cordials, the diascordium, Venice treacle, and applications to the skin. And when you bear in mind that these therapeutics were carried out, in most cases, not by physicians but by very ignorant women, you will readily agree that recovery of the patient was not much beholden to the treatment. But a man had arisen who was to change all this: Thomas Sydenham published his first medical work in 1666, and the treatment of small-pox constituted an important part of his subsequent writings. What Sydenham said in effect was this: You may talk as much as you please about evacuating peccant humours, assisting the motion of nature, and opposing malignant and venomous qualities, and I myself may sometimes use such expressions; but, in the name of common sense, bring your treatment to the test of experience; do most patients recover under this method of treatment or under that?" And he came to the conclusion that most patients recovered under a treatment which was in many respects contrary to that in customary use; and he introduced what was called the cooling treatment. You will find it best set forth in his *Epistolary Dissertation.* For example, the noble Lady Dacres sent for him to attend her grandson, Mr. Thomas Cheut, in the flower of his age, and suffering from what turned out to be a very severe attack of confluent small-pox. Take this as a sample of Sydenham's treatment of the young man about the end of the first week, when things were at their worst. "I gave him an ounce of syrup of poppies out of cowslip water at bedtime, and repeated it every night. I allowed him no more than his usual bedclothes. He might eat oatmeal porridge and barley broth, and occasionally a roasted apple. He might drink a little small beer. On the eighth day I laid an onion wrapped in linen, on the soles of his feet, and renewed it every day until he was out of danger," a harmless remedy, even if useless. Sydenham might have complained with Virgil, *Hos ego versiculos feci, tulit alter honores*, for the physicians who came after him reaped the profit of his improvements in medical practice, and especially Radcliffe, whom Macaulay speaks of in the passage I quoted to you just now. We know almost as little of the life of Sydenham as of the life of Shakespeare. The impression left upon my mind is that Sydenham was not a very successful man as the world commonly reckons success; but I think he attained the most precious gift which man can attain to, namely, inward peace. He ends the *Epistolary Dissertation*, to which I just now referred, with this strain of reflections. "And now, worthy sir, I desire you to accept this small treatise favourably, which was designedly written to return you thanks for your approbation of my other works. And, indeed, I have so seldom received anything like approbation, that either I have merited no such thing, or else the candid and generous men whom nature has framed with such excellency of mind as to know how to be grateful, are very few, scarce so many as the gates of Thebes, or mouths of wealthy Nile. Yet, notwithstanding, I endeavour all I can, and will do so, to learn and promote the method of curing diseases, and to instruct those who are less conversant in practice than myself, if any such there be. Let other people think of me what they please. For having nicely weighed whether it is better to be beneficent to men or to be praised by them, I find the first preponderates and most conduces to peace of mind. As for fame and popular applause, they are lighter than a

feather or a bubble, and more vain than the shadow of a dream. But if any think that riches got by such a reputation, has in it somewhat more of solidity, let them enjoy what they have scraped together with all my heart, but let them remember that many mechanics of the most sordid trades get and leave more to their children." We know that Sydenham read Boethius—and what man is he, great or small, who doth not seek the consolations of philosophy? "For I turned, and saw under the sun, that the race is not to the swift, nor the battle to the strong, nor bread to the wise, nor riches to men of understanding, nor favour to men of skill; but time and chance overtake them all."

After Sydenham's death his improved method of treatment was widely adopted, and we may believe that the ravages of small-pox were somewhat stayed thereby. Yet a few years more, and another means of dealing with the disease was introduced; I refer to inoculation, which was first performed in England at the desire of the famous Lady Wortley Montague, in 1721. Her only brother, Lord Kingston, when under age, but already a husband and a father, had been carried off by small-pox, and she herself had suffered severely from it; though it had not left any marks upon her face, it had destroyed her fine eyelashes, and had given to her eyes a fierce look which impaired their beauty.

I shall say nothing more about inoculation, excepting this, that it seems to have been a success or not a success according to the point of view from which we regard it. So far as the inoculated persons were concerned, the mortality from small-pox was much diminished; few inoculated patients died. But so far as the whole nation was concerned, the mortality from small-pox was much increased. "The infection spread more widely; many persons were obstinately prejudiced against inoculation; many were altogether wanting in foresight, and neglected to avail themselves of its advantages; and many could not afford the time and expense incident to it. From these causes a large number of unprotected persons continued to exist, and the small-pox spread more widely than before, inasmuch as inoculation established so many new centres of infection." In short, there seems to be no doubt that the risk, to those unprotected, of infection by small-pox was greater than before.

I come now to vaccination. Jenner tells us that he had heard that "when the Duchess of Cleveland (he means King Charles the Second's Duchess) was taunted by her companions that she might soon have to deplore the loss of that beauty which was then her boast, the small-pox at that time raging in London, she made a reply to this effect,—that she had no fear about the matter, for she had had a disorder which would prevent her from ever catching the small-pox." This certainly seems to be an allusion to cow-pox. Early in the last century the milkmaids of some of the south-western counties knew that cow-pox prevented small-pox.

About the year 1745 this fact became known to a boy named Benjamin Jesty. Thirty years later, in 1774, he inoculated his wife and two sons (aged three years and two years) with the cow-pox, or, in other words, he vaccinated them from the cow, in order to "counteract the small-pox at that time prevalent where he resided." But behold the fate of a reformer! After Jesty's vaccinations, "his friends and neighbours, who hitherto had looked up to him with respect on account of his superior intelligence and honourable character, began to regard him as an inhuman brute, who could dare to practise experiments upon his family, the sequel of which would be their metamorphosis into horned beasts. Consequently the worthy farmer was hooted at, reviled, and pelted whenever he attended the markets in his neighbourhood. He remained, however, undaunted, and never failed from this cause to attend to his duties."

In 1805 he and his family came from Downshay, in the Isle of Purbeck, up to London on a visit. Jesty's portrait was painted, and one of his sons, whom he had vaccinated thirty years before, "very willingly submitted publicly to inoculation for the small-pox in the most vigorous manner, and Mr. Jesty also was subjected to the trial of inoculation for the cow-pox after the most efficacious mode, without either of them being infected." The portrait represents "a good specimen of the fine old English yeoman [a race which is now well-nigh extinct, alas!] dressed in knee breeches, extensive double-breasted waistcoat, and no small amount of broadcloth. He is represented sitting in an easy chair, under the shelter of a widespreading tree, with his stick and broad-brimmed hat in his left hand. His ample frame is surmounted by a remarkably good head, with a countenance which at once betokens firmness and superior intelligence." Upon his tomb in the churchyard at Worth Maltravers in Purbeck, in Dorset, is this epitaph:—"Sacred to the memory of Benjamin Jesty, who departed this life on the 16th April, 1816, aged seventy-nine years. He was born at Yetminster, in this county, and was an upright honest man, particularly noted for having been the first person known that introduced the cow-pox by inoculation, and who, from his great strength of mind, made the experiment from the cow on his wife and two sons in the year 1774." It is a notable fact that a circle with a radius of five miles can be drawn upon the map of Dorset so as to include Wingford Eagle—the birthplace of Thomas Sydenham; Rampisham—the birthplace of Francis Glisson; and Yetminster—the birthplace of Benjamin Jesty.

I come now to Edward Jenner. He was born at Berkeley, in Gloucestershire, in 1749. When he was twenty years old, in 1769, "he was pursuing his professional education in the house of his master at Chipping Sodbury, in the same county, when a young woman came to seek advice; the subject of small-pox being mentioned in her

presence, she immediately observed, 'I cannot take that disease, for I have had cow-pox.'" From this time forth his mind never ceased to reflect upon the milkmaid's observation. "To everything there is a season, and a time to every purpose under heaven." It is clear that the fulness of time for the disclosure of vaccination had come, and the man for the purpose was ready. Men famous for one great discovery often have their attention drawn thereto in youth, and the rest of their life is wholly devoted to the development of their one idea. Jenner was essentially a man of one idea. For thirty years he was collecting facts and knowledge relative to cow-pox, and his book, which was published when he was nearly fifty years old, represents the final stage of his discovery, beyond which he never advanced—his book exhausted him. During those thirty years he studied the natural history of cow-pox, its relation to that disease which in horses is called the grease, the different eruptions on the teats of cows which are communicable to the hands of milkmaids, the distinction of that kind of eruption which is protective against small-pox (that which he called the true cow-pox), and lastly the possibility of intentional vaccination as a prophylactic. Jenner's procedure seems to have been very slow, and he did not keep what was passing through his mind a secret. When he came up to London at the age of twenty-one, he tried to draw John Hunter's attention to the subject. After Jenner had settled in practice at Berkeley, he talked so much about cow-pox in the medical societies of the neighbourhood, and seemed so little able to talk about anything else, that he came to be looked upon as a well-meaning bore. "Then said I, wisdom is better than strength; nevertheless, the poor man's wisdom is despised and his words are not heard." Jenner's main merit was that he believed in himself and in vaccination. The cow-herds and milkmaids of Wessex discovered that cow-pox prevented small-pox, Jesty practised vaccination, but Jenner was full of the enthusiasm of a man who believes that he has made a great discovery; he saw the immense power latent in vaccination, and he did not rest until he had made other men see it too.

What I have called Jenner's book was published in June, 1798; his subsequent writings did but re-affirm and illustrate the doctrines of his first book. To the chief doctrine, namely, that cow-pox is preventive of small-pox, he added two propositions (which he himself calls conjectures), namely, that cow-pox is derived from a disease of horses named grease; and that cow-pox, grease, and small-pox are three different forms of what is essentially one and the same morbid poison. From the time when Jenner first propounded these theses up to the present day, they have not ceased to meet with strong opposition. It is no intention of mine to enter the fray, which has been carried on with more heat and less temper than might have been desired. Arguments have done their best, we have had enough of them, and the disputed questions are not yet settled. What we want are more facts, and, in particular, I think we want what Bacon calls instances of alliance. Judge of what would be the result, were such an instance to be discovered in the form of a microbe, an *ens variolarum*, which we could use as a touchstone of what is small-pox and what is not. Jenner's conjectures would disappear, they would be either truths or not. Meanwhile, we cannot get beyond opinions.

Jenner possessed the first and most necessary of virtues, namely, courage. He never shrank from avowing his opinions. The name which appears on the title-page of the book, "Variolæ Vaccinæ," indicates as clearly as possible his belief that cow-pox is simply small-pox occurring in the cow. And although he did not invent the term variolæ equinæ, or horse small-pox, he could not have declared his opinions in this respect more strongly than he did when he went into some stables with his nephew, George Jenner, and, pointing to a horse with diseased heels, said, "There is the source of small-pox." Mark, not merely "There is small-pox," but "There is the source of small-pox." Indeed, he says much the same thing in the earliest pages of his book. Jenner's opinions concerning horse-pox are by no means to be lightly set aside; and they seem to have become stronger as he became older. In his book he doubts whether the virus of grease, directly inoculated into man, can be relied upon as a preventive of small pox. But his friend Baron, who knew him in after life, tells us that "Dr. Jenner was in the practice of using equine matter [for inoculation] with complete success," and that grease "when communicated to man is capable of affording protection against small-pox, even though it had never passed through the cow." Here is a drawing which shows the kind of eruption which grease produces in man, and you will observe its close resemblance to cow-pox. The drawing was taken from a patient of Mr. Langton's, from a groom, who, seven days before admission to the hospital, had charge of a horse suffering from inflammation of the legs and cracked heels, from which there was no discharge, but only a foul smell.

I will conclude this topic by quoting a paragraph from the *Traité de Médecine* of Charcot and Bouchard, published in 1892, and I choose a foreign book in order that you may know what they think about these matters abroad. "Horse-pox (Jenner's grease) in spite of the descriptions of Loy and Sacco, was for a long time confounded with other diseases of horses' feet, but the researches of Lafosse and Bouley have determined exactly the symptoms of grease. It is characterised by an eruption which may appear on any part of the body, and is often confined to a limited space, such as the lower part of the legs, around the nostrils and lips, within the nasal fossæ or the mouth. The eruption consists of vesicles which attain maturity on the eighth or ninth day. Inocu-

lation of cows with the exudation causes cow-pox. Inoculation of infants causes well-marked vaccinia, but with very violent inflammation. Conversely, cow-pox or humanised vaccine, inoculated into the horse produces horse-pox."

From the time of the first publication of Jenner's book, vaccination has been a field of strife. What was his attitude with respect to this wordy war? Baron tells us that "although Dr. Jenner was the object of many harsh and unfounded assertions, he never thought it necessary to weaken that strong position which truth and knowledge had enabled him to take, by replying to them." We may say that he had learned, with the young man in Esdras, that great is the truth and stronger than all things. That aspect of the Eternal Divine Being, which we call the truth, will manifest itself at the time appointed, whether we, puny phantoms of an hour, will hear or whether we forbear. And, as to calumny, Jenner would have agreed with Ben Sirach, that "if thou blow a spark it will burn, and if thou spit upon it, it shall be quenched."

When Jenner had become famous, some friends, more sanguine than sagacious, suggested that he should set up as a physician in London; and one admirer went so far as to hold out the prospect of making thereby ten thousand pounds a year. Jenner came to London, took a house in Mayfair, stayed in it for a year, found that his receipts did not cover his expenses, and went back to Berkeley. There he spent the greater part of his remaining life, and there he died, like the stag, where he was first roused. Surely if his friends had reflected upon the usual course of events in this world, and upon Jenner's character in particular, they would not have given that advice. He was now past fifty years old, and at that age you cannot transplant a man any more than a tree, least of all from the country to the town, and Jenner's whole life had been passed in the country. His character was unfitted for London. He was, as we have seen, a man strong and of good courage, but he was also honest and true. Moreover, we are told by his friend Baron that his nature was mild, unobtrusive, and unambitious. Jenner's own words imply as much. In a passage, which has been often quoted, from a letter to a friend, he says, "Shall I, who even in the morning of my days sought the lowly and sequestered paths of life, the valley and not the mountain, shall I, now my evening is fast approaching, hold myself up as an object for fortune and for fame? Admitting it as a certainty that I obtain both, what stock should I add to my little fund of happiness? My fortune, with what flows in from my profession, is sufficient to gratify my wishes." The same disposition animates an equally well-known piece of autobiography, which even those to whom it is familiar will like to hear again. He says, "While the vaccine discovery was progressing, the joy I felt at the prospect before me of being the instrument destined to take away from the world one of its greatest calamities, blended with the fond hope of enjoying independence and domestic peace and happiness were often so excessive that, in pursuing my favourite subject among the meadows, I have sometimes found myself in a kind of reverie. It is pleasant to me to recollect that those reflections always ended in devout acknowledgments to that Being from whom this and all other blessings flow."

I will now conclude by asking you to call to mind the old fable of Apollo and Python. The serpent Python signifies pestilence, engendered in the mud and filth of the world. Python pursues Latona, daughter of an earth-born Titan, until her son Apollo appears upon the scene. And what says Apollo of himself?

> "Medicine is mine: what herbs and simples grow
> In fields and forests, all their powers I know,
> And am the Great Physician called below."

Apollo shoot out his arrows and destroys Python.

Medicine has slain many pestilences which once defiled this fair land of ours: leprosy, ague, plague, dysentery, cholera, typhus and small-pox. But the race of Python is not yet extinct: yours is the work of carrying on the conflict between medicine and disease.

On Psychological Time.

BY T. CLAYE SHAW, M.D., F.R.C.P.

WHAT is "Time"? To many it is an entity, an actual thing. The man who says "give me more time," "how quickly the time goes!" "how much of my time are you going to take?" &c., expresses the common idea that "time" is something that can be saved, or wasted, or cut with sections, or dealt with generally, like a block of wood. Allied to time is space—indeed, the one is usually expressed in terms of the other. "How far is it from here to Zermatt?" says the weary trudger to the peasant on the road. "Two hours," says the latter; and so the former concludes that he has about six miles to go; or, in other words, the space is measured by time. "How long will it be, doctor, before I am well?" says the patient; and when he is told that "three days must elapse," he ought to see that the answer to his question of time is given in terms of space, or in the uniformly repeated changes in external nature. Time can only be viewed as the consciousness of change, so that where there is no consciousness there can be no idea of time; and again, where there is no change there can be no idea of time. As to the degree of change that is required to constitute time, it varies with the individual. When I think of what I did in a certain "time" yesterday, I have before me a succession of events of various degrees of consciousness; and if I want to represent these to myself at some future time, or to others, I must have some scale of measurement, possibly

an arbitrary one at first, but subordinated subsequently to the common rule. The most prominent of these events will be the beginning and the end of the series, and between these two points will be others separated by more or less rhythmical periods. The most constantly regular movements appear to be those of the universe, and the interval between the rising of the sun from day to day, forming a convenient standard, is arbitrarily divided into so many hours, and these ultimately into so many seconds, each division of time thus recorded corresponding with a certain movement in space of the sphere. Our "time," then, or the succession of events, is now made manifest by the rhythmical beating of a pendulum causing the hands of a clock to move over a certain amount of space. But this is not psychological time. With a chronoscope it is possible to calculate the $\frac{1}{1000000}$ of a second, and we can imagine this carried to a mathematical abstraction, each instant being exactly like the other, unlimited; but Psychological Time is unequal, we pause at different points, and taking a stand there we look backwards or forwards, the standing point being chosen by the interest or number of the facts experienced. There is an expression much in vogue—"a Psychological Moment"—the meaning of which is worth a passing attention. A person who is suddenly placed in an arduous position, or is in a crititical situation, is said to have a "psychological moment." The time passed between the reassembling of the jury and the delivery of the verdict is to the prisoner a "psychological moment." It may seem to him to be years, so rapid is the succession of events in his mind; or he may have no idea of time at all, so concentrated is his attention upon one idea. As regards "time," therefore, a "psychological moment" has, strictly speaking, nothing to do; it means simply a highly strung state of feeling, in which the consciousness of space travelled is obliterated. Time, ages, eternity, are abstractions; they have had no conceivable beginning, and have no conceivable ending. We must (Höffding) conceive them as "a straight line indefinitely extended in either direction." But, like all abstractions, we endeavour to embody the ideal, and time is represented as an old man with a scythe, and wings to show that events pass rapidly, and that matter is not unchangeable.

When the question of "feeling" comes in, how different is the case! In his interesting article "Consciousness," in Tuke's Dictionary, Dr. Mercier calls attention to the difference between states and changes of consciousness, the difference being one of duration only, and whilst the former have an appreciable duration, the latter have none appreciable; but these states and changes are both "feelings," and the fact to be kept in mind is that whilst mental states (*e.g.* the concept of a city) have a considerable duration, and mental changes (*e.g.* the change in passing from the concept of a city to that of a war-ship) a very short one, the important element that gives the idea of time to the observer is the change from one state to another state. If, then, the change from one mental state to another is very rapid, and the changes are numerous, a very long period may seem to have elapsed, because it appears impossible that so many events (judging from previous experiences) could have occurred in such quick succession "in the time;" and, on the other hand, a long-continued mental state may carry with it no idea whatever of time, because there is no change of consciousness which serves to mark it.

But what, after all, is the use of thinking of time as a never-commencing and never-ending line? To mankind at large it is a very real thing. To some it is an affair of viscera. Breakfast-time, dinner-time, tea-time, and bed-time constitute the diurnal temporal menu. To an animal the clock is in the stomach; when it is hungry it is time to work and get a living, when it has fed it is time to rest, to enjoy it. The lazy man finds time "hang on his hands," for the state of mind without change of state carries with it no element of feeling so satisfactory as to make its prolongation desirable. The busy man finds time all too short, and the feelings of the rush of changing states are to him unsatisfactory from their rapidity and intensity. The end desired is the common criterion of time, and the feeling mixed up with it is the determinant of the rate of speed with which events pass, *i.e.* of the rate at which time goes. The feeling of remote death is a scarcely perceptible one, that of immediate death is painful; in the former case there are so many events to occupy the attention that the mental content of the moment is satisfied; only when there are no more events, and the next one is the grand climax itself, does the feeling become paramount. Time is, then, a matter of feeling. How differently must a lifetime seem to different men! To one it is a long, unemotional, unvaried sameness; to another it is gone like a flash,—brilliant, intense, restless. Could the one live his life again in that of the other, he would not understand that the times were the same. What would be the thirty years of a Napoleon to the thirty years of a simple shepherd? Truly the months spent at St. Helena must have been the embodiment of time long drawn out.

As regards "space," there is as much uncertainty about it as there is about "time," some maintaining that our knowledge of it is intuitive, others that it is an acquired faculty based upon inheritance. We are as incapable of imagining the beginning and ending of space as we are of time, and if we are to form any idea about either we must do it under limitations. Since we measure one by the other, ideas about them ought to be interchangeable; there is, in, fact no reason why the answer to the question "What time is it"? should not be "twelve thousand miles," meaning that it is twelve o'clock; or we might represent to ourselves the relationship between space and time by saying that space is what things move in, and time is what events happen in.

In writing lunacy certificates, or describing insane states, the condition of the patient's ideas as to time and space is frequently referred to, and a very good unit of sanity it is to draw attention to, because it is the index of the state of consciousness. In acute insanity, especially of the maniacal character with much incoherence, lessened inhibition, and a more decided reflex condition of brain action, the patient often says that he remembers nothing, has no idea how long he has been ill, nor where he has been. There was practically no true consciousness in the acts and sayings, and therefore the difference between mental states which is the basis of time could not be appreciated. It would be just as reasonable to expect knowledge of time in such a person as it would in any ordinary reflex act. Nothing points so clearly to the reduced nature of the maniacal condition as does the defect in time-knowledge. Alterations in time-rate are in some forms of insanity coincident with space misapprehensions, as in the general paralytic who could run three times round the world in the thousandth part of a second. But while to some time is apparently shortened, to others it is lengthened, as in a patient here who suffered from a long attack of melancholia, in which for weeks he never spoke. On his recovery he said that he had been possessed by one idea, and that the time of his illness seemed to him to have been years. "Well," said the writer to a very maniacal and deluded woman, "how old are you?" "Hundreds of years," said she, "and this place belongs to me." "How long have you been the possessor of this place?" "Centuries," said the woman. It is of little use to argue with Methuselahs of that description. It is probable that true consciousness, memory for recent events, and power of attention, are only compatible with soundness of the highest developed "platform," the last product in the evolution of the mental state of the individual; and inasmuch as our ideas of time depend upon the power of fixing points in the train of thought, in other words of exercising inhibition whenever we wish, all conditions where inhibition is imperfect or impossible show to a greater or less extent difficulty in the appreciation of time, to a small degree in melancholia, to a greater degree in mania, greatest of all in stupor. An imbecile patient used to say that she was "40 years old, and 26 years of age;" the former was correct, the latter may have been what she wished she was, though one feels more inclined to attribute the difference to confusion of idea than to the untruthfulness of an innate vanity. What a blessed thing it is that in the majority of insane states the outrageous ideas, the cruel and filthy language, the obscene acts, the absurdities and devilries, form an alien group which on recovery is completely ignored, shelled out like an obnoxious growth, leaving a vacuum in the time and space of a life, which is gradually obliterated by the contraction over it of the happier events of the earlier life fused with those of the recuperated mind! Did you ever lose your watch and have to be dependent for your time on the consciousness of passing events and the memory of their position on the "line," *i. e.* the order of their occurrence? At first the loss is felt to be inconvenient, but one soon becomes accustomed to paying attention to occurrences and to local measurements hitherto neglected; in fact, the faculty of determining time becomes very accurate, and it can be trained to the discrimination of quite small periods. There is no doubt of this power in animals. The invention of watches seems to have been as great a saving as that of writing was for the memory. Instead of having to recall what we have done, or of looking around for changes in space of moving objects, we simply look at the watch and save ourselves a large amount of trouble and repetition.

To tell the time without a watch requires a comparatively perfect brain action; a chronometer in the hands of a lunatic may do much to conceal his real impairment.

When intellect proper is reduced to its lowest ebb, as in the degraded idiot and imbecile, the bodily functions in their regularity are themselves time-measurers as accurate as any klepsydra, hour-glass, or pendulum; but though the periodic times may be as regular as the ebb and flow, there is no more idea of time than there is in the sea itself. Day and night to the idiot mean nothing more than a change in sensation, and there is probably no more idea of time proper than there is in a cephalopod mollusc. Philosophers have been much exercised as to which of the two comes first in the order of development—the idea of space or that of time. The necessity to the existence of the body of the organic functions of nutrition leads us to think that the idea of time is earliest developed, and that space very soon follows it. When people are on the look-out for signs of insanity, they do not, as a rule, seem contented unless they can evoke some glaring delusion or hallucination. Important as these are, they are not always to be found at an early period, whilst it is in my experience very common for an insane person in an early stage to have lost his due appreciation for time, for the relationship of things as they are, judged by the standard that the particular individual has been in the habit of measuring them by. In the hope of calling attention to this important factor in diagnosis I have ventured the above remarks.

Post-Graduate Course in Clinical Bacteriology.

DR. KANTHACK will begin his course on September 7th, at 2 p.m. The class will meet on Mondays, Tuesdays, Thursdays, and Fridays, at 2 p.m., and the course will be continued until September 25th. On each afternoon there will be a short lecture with lantern demonstration, followed by practical work in the Pathological laboratory. Gentlemen desirous of attending the course are reminded to communicate with Dr. Kanthack as soon as possible, so that the necessary arrangements may be made.

Fee (including use of microscopes and material) £3 3s.

Bad Kissingen.

By Our Own Correspondent.

ACTING upon your instructions, I booked through to Kissingen. The journey was quite devoid of interest. On the boat from Dover to Ostend they had an ingenious plan to prevent passengers stealing the soap. A bit of this commodity is put into a kind of coffee-mill, and the traveller grinds out as much as he thinks he wants. The *train de luxe* soon ran us to Frankfort, where a passenger was reproved for undressing before an open window. The official said it "Vood be nicer" if he shut the "vindur." Bad Kissingen is reached about half-past nine in the morning, about twenty-four hours after leaving Charing Cross. The journey is an easy one, and may be undertaken by anyone who has not got beyond the *Hst. Gent. c. Rheo* stage. I went to the Hôtel de Russie, which is very comfortable, and, you will be glad to hear, reasonable in its charges; especially when we remember that the season only lasts from the beginning of May until the end of September. All the rest of the year the house is shut up, and under the charge of caretakers. The first day is spent in looking around and seeing the doctor. The look around is soon done; Kissingen is quite a small place, about as big as the village of Hatfield, so that one can soon exhaust all that can be seen in the town. It lies in the valley of the Saale, which is a sluggish, turbid brook, in which a trout is said to have been caught. In the town, where it runs amidst the buildings, it rather reminds one of the backs at Cambridge. But, Mr. Editor, your readers have guide-books, so let them read the usual descriptions of the town pump, church clock, cemetery, and local magnate, for themselves—you sent me on a scientific mission. People do not go to Kissingen to study architecture, but for "the cure." Our hotel waiter gave us the first information as to the cure. He said, "You get oop at sex, trink tree glasses of the vorters, af ein bad, af your dinner, go to schleep, listen to the band, 'ave more of zie vorters, 'ave supper, and go to bed." We told him we were going to consult a doctor; he seemed hurt, and said, "Vell, he vill tell you no more." He was quite right. I sent your editorial card and my own up to one of the most learned and distinguished physicians in Kissingen. He was fully occupied when I called at 3 p.m., inasmuch as 3 p.m. to 6 p.m. are the ordinary hours for consultation at the doctor's own home. For us, of course, the manner of the consultation and the surroundings of the great man, and his way of doing things, have a peculiar interest. Downstairs we rang a bell; a door opened in a mysterious way; we groped our way upstairs to an ante-room, where several people sat waiting to hear their fate. The room was bare, and did not convey that air of affluence which the waiting room of even a sucking physician does in London. A few guide-books, a few photos, and a cabinet with odds and ends such as one sees in Lowther Arcade, and which were evidently presents from grateful patients, adorned the room, and protected us against *ennui*. A door opened, and an old gentleman with long white hair and a long white beard beckoned me into another apartment. An enormous ring upon his left forefinger, and other articles of jewellery, showed that after all things did not go so badly at Kissingen. The waiter was right. I need not repeat. The doctor preached abstinence from wine, and like a good preceptor told us what he practised himself; quoth he, "Ven I do take a bottle of vine, I do haf a veek with him." Just think of struggling a week with a bottle of wine which tastes as if it had mistaken its vocation, and slipped out of the cruet-stand. I now know, sir, why vinegar is called vinegar. Have not "*vin*" and "*aigre*" got something to do with it? I was to drink three glasses of Rakoczy every morning, and have a Soole bath each day. They are very proud of Rakoczy, as they call their principal spring, and they often call it "our beautiful Rakoczy." It is the strongest of the drinking waters. It tastes like salt and water with a dash of ink. A quantity of carbonic acid gas gives it a slight sparkle, and is soothing to the "inside." Rakoczy is in the centre of the little town, and about a couple of hundred yards from all the chief hotels. Close to it is Pandur, an almost identical spring, and not far off Maxbrunnen, a much milder water, rather like our table waters. The Soole, or brine water, springs up about a mile from Kissingen, in the valley. It is like sea water with a quantity of carbonic acid gas in it.

An ordinary day's work at Kissingen is as follows: The band begins to play in the gardens around the springs at 6 a.m., and goes on until 8 a.m. The music is excellent, and some must find it most soothing to swallow their water to the inspiring strains of the trombone. The attendants, who are most polite and good-natured men, fetch the water in tumblers in batches of a dozen at a time. It is rather amusing to see the men and women scramble for them. The latter have not a very good chance, as the men, although always bowing and scraping, are not above grabbing the glass which the lady has almost taken into her hand. Near by are large shallow tanks with hot water, so that the water can be slightly warmed, and some of the carbonic acid gas driven off. After having drunk a tumblerful of water, a quarter of an hour's gentle walk is taken, then another glass and another walk, and so on. A real champion gets up before six and does his six or seven glasses before breakfast. That meal is taken half an hour after the last glass, and consists of cure bread and coffee. Some add fish or eggs and bacon and such like, but butter and fat are "taboo." After breakfast a rest, and then the Soole bath. This is really delightful. A huge wooden bath is filled with the brine water and heated to about 95° F. by a steam coil which is fixed round the bottom of the bath. When the steam is set agoing the water boils with the liberated gas; also, all the surface of the body becomes covered with

bubbles of it, and this, together with the salt, produces a most delightful and invigorating effect. After twenty minutes in the bath the surface of the body is quite red and glowing, and in a condition of "goose-skin." The water at the baths outside the town, where the spring arises, is much fresher and more full of gas than that which has been pumped to the town; therefore the knowing ones, or those who are not too fat or lazy to walk, betake themselves off to the fountain head. Of course, the Soole water is used in all kinds of ways, but I have told you the usual one. The bath is followed by a mid-day dinner. This is rather trying at first, but there is no doubt it suits the treatment to dine early. At night, a very simple supper, consisting of a basin of barley soup and a little plain meat and vegetables, is taken. Some hardy people have another dose of Rakoczy water betwixt five and seven, when the band plays again. This course is usually continued for three weeks—your correspondent will be cured in a fortnight. Now for the effects of this treatment: the shop windows afford a rather good idea; they contain plaster figures, one of which represents an enormously fat and bloated man with a gigantic paunch, and the other the same become slim and genteel, and gazing blissfully into a vacuity in his nether garments. This thinning is not brought about by aperient action, for that is slight. But evidently most active tissue changes are produced, and doubtless the diet has a salutary effect. It is rather odd to find that during the first few days all the muscles and fasciæ become tender, and that muscular rheumatism is the order of the day; but this is followed by an improved appetite and a delightful feeling of returning vigour and health. At first, too, every one becomes very pale, with sunken and watery eyes, but this likewise departs. I have been much struck to see youths with most severe acne of the face get quite well in a week or ten days. The cramps and pains of gout likewise depart. The eczemas do not seem to do so well, or may even be made worse owing to the salt in the Soole bath. The patients, however, feel so much benefit that they seem always to continue their course. When it is over many take themselves off to the Black Forest for an after cure. I ought to add that Kissingen is a splendid place for the cure of indigestion.

The people who come for the cure are a most cosmopolitan brigade—not many English, vast numbers of very stout German men and women, Russians, and numbers of Jews. In the morning a royal prince, a princess, a fat German, a Jew, and a foreign correspondent may be seen promenading side by side. For those who come to lend moral support and to cheer up the water drinkers, Kissingen affords a fair amount of amusement. The country around is full of forests, and the roads are good. Massive castles are studded upon every height, and at each there is an inn where very nice coffee can be drunk. There is also a bicycle school where lessons can be taken and machines hired. Having taken lessons I propose to ask you on my return to try and get me the state bed in one of the wards, with a screen, and special diet, so as to recover from my bruises and wounds. In the Saale the enthusiast can fish. A hero caught a little fish the other day, much to the joy of a crowd of small boys. But, as you may have inferred, the cure is all in all.

Notes.

THE UNIVERSITY OF LONDON COMMISSION BILL, which was introduced into the House of Lords by the Duke of Devonshire last month, contains provisions which embody every one of the points desired by those who are advocating the reform of the University on the lines of the Cowper Commission. This is so far satisfactory, and we note with pleasure that the Bill has already reached a third reading in the House of Lords. We understand, however, that there is a grave difference of opinion on the subject of the relations of King's College to the University, which, unless it can be amicably settled within the next few days, will prove fatal to the passing of the Bill this session. We fear that in any case it could not pass the House of Commons before the rising of Parliament. It is monstrous that the requirements of London in the matter of University education and development should be thus shelved from session to session.

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MR. H. T. BUTLIN, who has held the office of Treasurer of the British Medical Association for six years, has now retired from this position, and in retiring from office he informed the British Medical Association that in 1889 their income was £30,000, the expenditure £26,660, and the invested funds £20,000. Now the income is £38,300, the expenditure £34,860, and the invested funds £45,000. This is a good record.

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SIR DYCE DUCKWORTH'S Address on Medicine to the British Medical Association at Carlisle was exceedingly well received, and voted on all sides to have been excellent. His subject was a well-chosen one, and he dealt with it in his well-known comprehensive and masterly style.

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DR. GEE and Dr. Norman Moore have been appointed members of the Library Committee of the Royal College of Physicians, and Dr. Moore has been elected one of the Curators of the Museum of the College.

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SIR DYCE DUCKWORTH has been re-elected Treasurer of the Royal College of Physicians.

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DR. VINCENT HARRIS has been re-elected an Examiner in Physiology for the Second Conjoint Examination.

Dr. Lewis Jones has been re-elected Examiner in Elementary Physiology for the First Conjoint under the four years' regulations.

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Dr. W. S. A. Griffith has been elected Examiner in Midwifery and Diseases of Women for the final L.R.C.P. and M.R.C.S.

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Mr. J. Langton has been elected Examiner in Surgery by the Royal College of Physicians.

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Mr. H. J. Walton, who passed first into the Indian Medical Service in February, has maintained his position at Netley, being head of the list with 5907 marks. He gained also the Martin Memorial Medal and the first Montefiore Prize of 20 guineas.

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Mr. J. S. Stevenson is fifth with 4940 marks, Mr. G. A. Smith sixth with 4915 marks, and Mr. W. G. Richards is eleventh with 4435 marks.

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Mr. A. H. Morris is third on the list of the Army Medical Staff at Netley with 4372 marks, and Mr. M. Swabey is eighth with 3873 marks.

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We notice the promotion of Surgeon-Major Thomas, M.D., of the 4th Volunteer Battalion of the Devonshire Regiment, to be Brigade-Surgeon Lieutenant-Colonel. Dr. Thomas is a first-class rifle shot, and has often figured successfully in the Bisley lists.

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The result of the Examination for the Junior Scholarship in Chemistry, Physics, and Histology, is (1) J. S. Williamson, (2) E. G. Smith.

* * *

The Gold Medal of the British Medical Association has been awarded to Surgeon-Captain Whitchurch for his distinguished gallantry in the performance of his duty. The motion was proposed by Dr. Saundby and seconded by Sir Willoughby Wade.

Amalgamated Clubs.

LAWN TENNIS CLUB.

The Tennis Club brought their season to a close on Saturday, July 18th, with a very creditable win over Surbiton, on their own ground. The club has had a very fairly successful season, having played 22 matches, out of which they won 14 and lost 8. The results would undoubtedly have been better if we could have played full strength more often. Only in two matches did we play our full team. It is to be hoped that next season the men will play more regularly. The following matches have been played since the last issue of the 'Journal.'

St. Bart.'s v. *Winchmore Hill.*—This return match was played at Winchmore Hill (opponents' ground) on Tuesday, July 7th, and was won by the Hospital by 8 matches to 4. R. F. Baird and C. H. Barnes won 2 matches and lost 1; R. Waterhouse and W. H. Crossley won 2 and lost 1; S. Hey and T. L. Wyndham won 1 and lost 2.

St. Bart.'s v. *Putney.*—Played at Putney on Wednesday, July 8th. The Hospital had a very weak team, whilst Putney were very strongly represented. The result was a win for the latter by 5 matches to 1. R. F. Baird and J. K. N. Marsh were the only pair to win a match.

St. Bart.'s v. *Forest Gate.*—Played at Winchmore Hill on Wednesday, July 15th. Forest Gate won by 5 matches to 2. W. H. Crossley and R. Waterhouse were in good form, and won both their matches.

St. Bart.'s v. *Surbiton.*—This return match was played at Surbiton on Saturday, July 18th, and was won by the Hospital by 6 matches to 3. This result was very creditable, as Surbiton put a very strong team in the field. R. F. Baird and H. W. Shewell were in very fine form for us, and won all 3 of their matches. S. Bousfield and F. E. Price won 2 and lost 1; W. H. Crossley and R. Waterhouse won 1 and lost 2.

United Hospitals' Athletic Club *v.* London Athletic Club.

The above clubs met at Stamford Bridge Ground on July 15th. After an interesting contest the United Hospitals won by 6½ events to 4½. On the previous occasion when these clubs met the London Athletic Club proved victorious. Considering the general excellence of the competitors—three present and three past amateur champions turning out—it was rather disappointing to find only about twenty spectators. The weather afforded no excuse, being all that could be desired. It had been proposed to hold a United Hospitals' Athletic Club Dinner after the meeting, but a sufficient number of names were not obtained, and this may have been partly due to the lateness in the session; but next year we hope it will be held after the United Hospitals' Sports, and that it will receive the support of all Bart.'s men interested in athletics. Details:

Half-Mile.—A. G. Butler (St. Mary's), 1; W. A. de C. King (L.A.C.), 2: W. Paul-Jones (St. George's), 3. Time, 1 min. 59⅗ secs. Paul-Jones led for the first lap, Butler second, and King third; in the second lap Butler took the lead, and led King by four yards into the straight; this the amateur champion could not make up, and thus Butler revenged his defeat in the Championships.

100 Yards.—H. C. Woodyatt (University College Hospital), 1; A. Ovenden (L.A.C.), 2; F. Sime (Guy's), 3; F. L. Stevenson (L.A.C.), 4. Time, 10⅘ secs. Ovenden made a great effort 40 yards from home, but made no impression on Woodyatt, who led all the way and won by a yard and a half; two yards between second and third.

Long Jump.—C. E. H. Leggatt (St. Mary's), 22 ft. 4½ in., 1; R. Williams (L.A.C.), 19 ft. 6 in., 2; B. C. Green (L.A.C.), 19 ft., 3.

Putting the Weight.—C. W. Young (L.A.C.), 37 ft. 3 in., 1; W. F. Bennett (St. Bart.'s), 2; J. A. West (St. Bart.'s), 30 ft. 9 in., 3.

220 Yards.—H. C. Woodyatt (University), 1; A. Ovenden (L.A.C.), 2; F. Sime (Guy's), 3. Time, 22⅘ secs. Woodyatt led the whole way, and won by three yards and a half; one and a half yards between second and third.

One Mile.—E. J. Wilkins (L.A.C.), 1; R. C. Leaning (St. Mary's), 2; S. L. Sarel (L.A.C.), 3. Time, 4 mins. 52⅖ secs. Leaning led for two laps and a half at a slow pace, when he was passed by Wilkins; on entering the straight Leaning closed up, but Wilkins lasting the longer eventually won by three yards.

120 Yards (Hurdles).—G. Shaw (L.A.C.), 1; F. H. Allfrey (Thomas's), 2. H. N. Coltart (George's) and R. Williams (L.A.C.) fell. Time, 16 secs. Won by six yards.

Throwing the Hammer.—G. S. Robertson (L.A.C.), 109 ft. 10 in., 1; W. Lawrence (L.A.C.), 101 ft. 8½ in., 2; W. F. Bennett (St. Bart.'s), 101 ft. 2 in., 3; C. I. Graham (Mary's), 94 ft., 4. Although beaten, Bennett is to be congratulated on his excellent throw.

High Jump.—C. E. H. Leggatt (St. Mary's), R. Williams (L.A.C.), (dead heat), 5 ft. 7¾ in., 1; W. E. Lane (L.A.C.), 0; B. B. Hunt (L.A.C.), 0.

440 Yards.—A. G. Butler (St. Mary's), 1; E. C. Bredin (L.A.C.), 2; F. S. Stevenson (L.A.C.), 0; J. B. Lloyd (L.A.C.), 0. In spite of his exertions in the half-mile earlier in the afternoon, Butler running in grand form beat Bredin by three yards. Time, 51⅘ secs.

Three Miles.—H. A. Munroe (Guy's), 1; A. Ll. Vaughan (Bart.'s), 0; E. J. Wilkins (L.A.C.), 0; W. F. Baker (Guy's), 0; A. Rye (L.A.C.), 0; S. L. Sarel (L.A.C.), 0. Munroe made the pace, and completed the first mile in 4 min. 46⅘ secs; at the end of a mile and a half (7 min. 18⅕ sec.) he was the only runner on the track. Although told he might stop, preferred to run on to "see what he could do," it being his first performance this year. Time, two miles, 9 min. 55⅘ sec; three miles, 15 min. 24⅗ sec.

"MORBUS CORDIS." AN INTERESTING CASE.

Distribution of Prizes.

ON Thursday, July 18th, the Prizes, Scholarships, &c., won by students during the past sessional year were distributed in the Great Hall of the Hospital by Sir James Paget, Bart. The chair was efficiently occupied by the Treasurer of the Hospital, Sir Trevor Lawrence, Bart., who, after making a few introductory remarks, called upon the Warden to present a report of the year's work. Dr. Shore then read the following report:

It is with much pleasure that I have now to present a most satisfactory Report of the past year's work. The position of the Medical School as the leading Metropolitan College of Medicine is still maintained. The number of students who began study in the School for the year 1895-96 was 187, of whom 105 entered to the full medical course, 62 joined for some special course of instruction, and 20 were students in the Preliminary Scientific Class. The total number of Students in attendance for the year has been 535.

The most important changes in the Hospital Staff during the year have been the appointment of Dr. Lauder Brunton as fifth Physician, and the election of Dr. Herringham and Dr. Tooth as Assistant Physicians. It was decided in November to combine the offices of Medical Registrar and Demonstrator of Morbid Anatomy, and to appoint two gentlemen to the combined offices. Dr. Calvert and Dr. Garrod were so appointed in December last, and the new arrangement has been found to work smoothly and with advantage to all concerned. In the Teaching Staff of the School there have been several changes—Mr. Willett, who has held the Joint Lectureship on Surgery for seven years, has resigned this office, much to the regret of his colleagues, and Mr. Butlin has been appointed Joint Lecturer with Mr. Marsh. With the permission of the Governors of the Hospital, Dr. Edkins has again given a course of Lectures on Chemical Physiology; and the Medical Officers and Lecturers are gratified at receiving permission for Dr. Chattaway to give a course of Lectures on Organic Chemistry during next year. Mr. C. B. Lockwood has been appointed Demonstrator of Practical Surgery and Mr. McAdam Eccles Demonstrator of Operative Surgery *vice* Mr. D'Arcy Power, whose term of office has expired. Mr. H. J. Waring has been reappointed Senior Demonstrator of Anatomy, Dr. Edkins Senior Demonstrator of Physiology, and Mr. W. E. Miles has been elected to the Anatomical Teaching Staff, as an Assistant Demonstrator.

The addition of a fifth Physician and the rearrangement of the beds, which took effect in October last, has enabled the Physicians to increase the number of appointments of In-patient Clinical Clerks available to the Students, so that now ample opportunities are afforded in all departments for clinical study and teaching.

It is with the greatest pleasure that the Medical Officers and Lecturers have heard of the recent decision of the Governors in regard to the question of board for the House Physicians and House Surgeons, and the decision has given rise to the liveliest satisfaction amongst the Students of the Hospital.

During the past year, the great value of the new Operating Theatre has been fully demonstrated, and the Governors are to be congratulated on this most valuable addition to the Hospital equipment.

The work done in the department of Pathology has been one of the most striking of all the advances made in Hospital work, and the direct value of pathological and bacteriological research in treatment of the Hospital patients has been fully and completely shown. During the year Dr. Kanthack has made no fewer than 891 examinations of pathological products from patients in the wards of the Hospital. He has been ably assisted by Mr. J. W. W. Stephens, the Treasurer's Research Student. Mr. Stephens has been engaged not only in assisting in the examination of pathological products from patients in the wards, but also in researches on the distribution and varieties of the Diphtheria bacillus, the pathologenic and chemical properties of the *Bacillus coli-commune*, the morphology of the tonsillar vibrios, and other minor subjects.

During the Summer session the Lecturer on Pathology, Dr. Kanthack, has with the consent of the Governors and of the Medical School Committee, acted as deputy to the Professor of Pathology at Cambridge.

It is with great pleasure that I have to report that the Jacksonian Prize of the Royal College of Surgeons of England, given for an original Essay on some surgical subject, which has more frequently been gained by young surgeons from St. Bartholomew's, has this year again fallen to us. It has been awarded to Dr. Kanthack for his essay on "Tetanus."

In Examinations, the Students of the Hospital have fully maintained the reputation of the School. The Murchison Scholarship, given in alternate years to a student in London and a student in Edinburgh, for the best examination in Medicine, has been carried off by Mr. Sinclair Gillies. At the Royal College of Surgeons of England nine out of ten passed the Final Examination for the Fellowship in November, and six out of nine passed in May last, whilst nine have passed the First F.R.C.S. Examination. At the Examinations of the Conjoint Board, eighty-two have completed their final Examinations and have received their diplomas of L.R.C.P. and M.R.C.S. Corresponding numbers have passed various parts of the Intermediate Examination, and the successful candidates have averaged about 80 per cent. of those presenting themselves.

At the University of London ten have taken the degree of Doctor of Medicine, one of them, Dr. C. H. Roberts, securing the Gold Medal. It is gratifying to note that this medal has been won by St. Bartholomew's men three times in the last four years. Seventeen have taken the degree of M.B., six securing honours. Amongst the honours men, Mr. Sinclair Gillies is conspicuous as having taken first class honours in all the subjects and in having secured the Scholarship and Gold Medal in Obstetric Medicine, and the Gold Medal in Forensic Medicine. Mr. A. R. Cook also secured honours in all the subjects, and the other honours men were Mr. G. H. Sowry, Mr. J. H. Bodman, Mr. H. J. Walton, and Mr. M. G. Pearson.

Six students have taken the degree of B.S.; one, Mr. J. S. Sloane gaining a first-class honours in Surgery. Fourteen have passed the intermediate M.B.; one, Mr. E. C. Morland, taking honours in all the subjects, and the Exhibition and Gold Medal in Physiology. Twenty-five have passed the Preliminary Scientific Examination. At the University of Cambridge, twenty-five have passed the first part (Surgery and Midwifery) of the Final M.B., and eleven have passed the second part (Med.), of the same examination; six have taken the Diploma of Public Health of Cambridge.

At the University of Oxford, one has taken the M.D. degree, three have been admitted as Bachelors of Medicine, and two have taken the Diploma of Public Health.

At the University of Durham, six have taken the degree of Doctor of Medicine.

In the competition for the Indian Medical Service, in August last, Mr. A. W. R. Cochrane was second, and after four months at Netley was head of the list in order of merit, and Mr. R. P. Wilson was fourth. In February last, Mr. H. J. Walton headed the list for the Indian Medical Service; Mr. F. A. Smith was fourth, Mr. J. S. Stevenson fifth, and Mr. W. G. Richards seventh in order of merit.

In the competition for the Army Medical Service, one was successful in August, and two were successful in February last; one, Mr. A. H. Morris, securing the second place in order of merit.

The new recreation ground at Winchmore Hill, which has now been open for about a year, has proved a great success in relation to the social and physical welfare of the students. The members of the Amalgamated Clubs now number over 600, so that practically all the students take a keen interest in this department of their Hospital life. In Inter-Hospital competitions the Association Football Club has again secured the Cup.

The students' "JOURNAL," under the able editorship of Dr. H. B. Meakin, has proved to be a great success. Its circulation now amounts to 1500 copies a month, and it forms one of the most valuable links between the past and present students, enabling "Bart.'s men" in all parts of the world to hear of the doings in the Hospital and School, and to keep in touch with their *Alma mater*.

In conclusion, I desire to thank the Treasurer of the Hospital and the Governors for the continued interest they take in the welfare of the School, and to assure them that it will always be the endeavour of the Medical and Surgical Staff and the Lecturers to maintain unimpaired the reputation of the School, and to make it worthy of our great and ancient Hospital.

The prizes were then distributed by Sir James Paget, the prize winners being presented in order, beginning with the Entrance Scholars in Science, and ending with the Lawrence Scholar and Gold Medallist. After the distribution, Sir James delivered a short address, congratulating the

scholars and prizemen upon their success, and expressing the hope that their several successes would prove to be the beginning only of prosperous careers in their profession and in after-life. He spoke of having himself been a prize-winner sixty-two years ago, and reviewed the value to him of the knowledge which he had acquired as a student. Of the actual facts he had learnt, few had proved to be of any direct value whatever; but of the educational importance of the study necessary to acquire and properly understand the facts he learnt, in training his mental powers, he spoke in the highest terms. He contrasted knowledge of sixty years ago with that of the present time, and particularly spoke of the vast improvements which during the past few years had been brought about in the School and Hospital. At the conclusion of the address a most hearty vote of thanks was given to Sir James Paget, on the motion of Dr. Norman Moore, seconded by Dr. Champneys. The meeting, which was voted on all sides a most successful gathering, concluded with a cordial vote of thanks to Sir Trevor for presiding, proposed by Dr. Church and seconded by Mr. Marsh. Afterwards many visitors were conducted over the Hospital and School buildings by the students.

The Rahere Lodge, No. 2546.

THE Installation Meeting of this Lodge was held in the Great Hall on June 9th, in the presence of 110 members and visitors. Bro. Alfred Cooper was installed as the second Master, and the following officers were appointed: Bros. Clement Godson, Walsham, Burns, the Rev. Sir Borrodaile Savory, Bart., Reece, D'Arcy Power, Gripper, Abraham, Holden, Swinford Edwards, Gilbertson, Lockwood, C. P. White, Ernest Clarke, and Madden. In the course of the evening Mr. W. H. Cross, Mr. Edgar Willett, Dr. Balfour Neill, Mr. Lance, and Mr. Newton were initiated into Masonry. A Past Master's jewel was presented to Bro. Godson, in token of his services to the Lodge during the first year of its existence. The brethren subsequently adjourned to a banquet at the Frascati Restaurant in Oxford Street, as no room was available nearer which would accommodate so large a number at dinner.

The next meeting of the Lodge will be held at Frascati's Restaurant on Tuesday, October 13th, at 5.30 p.m.

Appointments.

BERTHOLD, Thorne Thorne, M.D., B.S.Durham, M.R.C.S., has been appointed Hon. Medical Officer to the Woking Cottage Hospital.

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ROBINSON, G. H. D., M.D.Lond., M.R.C.P., appointed Assistant Physician for the Diseases of Women to the West London Hospital.

HOYLE, J. C., M.R.C.S., L.R.C.P., D.P.H., appointed Medical Officer of Health for Rangoon.

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PETHYBRIDGE, W. L., M.D., B.Sc.Lond., appointed Assistant Physician to the Plymouth Dispensary.

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CHAPLIN, A., M.D.Cantab, M.R.C.P., has been appointed Physician to the Metropolitan Dispensary *vice* Dr. Lewis Jones.

* * *

BARRON, T. Ashby, M.R.C.S., L.R.C.P., has been appointed Surgeon to the R.M.S. "Nile," bound for Brazil and Rio Plata.

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WHITEFORD, C. Hamilton, M.R.C.S., L.R.C.P., has been appointed Medical Officer to the Provident Branch of the Plymouth Public Dispensary *vice* W. A. Buchan, M.B., resigned.

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CAMPBELL, Harry, M.D. (Lond.), F.R.C.P., appointed Physician to the West End Hospital for Diseases of the Nervous System, Paralysis, and Epilepsy, Welbeck Street, W., *vice* Dr. W. Wallis Ord, resigned.

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LEGGE, Thomas Morison, M.A., M.D., B.Ch.Oxon., D.P.H.Camb., appointed Professor of Hygiene to the Bedford College for Women, London.

* * *

REEKS, Henry, M.R.C.S., L.R.C.P.Lond, appointed Medical Officer for the Workhouse of the Steyning Union.

Examinations.

CONJOINT BOARD—FIVE YEARS' REGULATIONS—*Chemistry.*—A. R. Tweedie, H. H. Sloane, R. H. R. Whitaker, W. E. Graham, M. G. Winder, W. E. L. Davies, E. A. Donaldson-Sim, G. F. Furley, L. E. Hughes, G. J. Humphreys, N. Leonard, N. Lipscomb, E. W. Price, D. S. Sandiland, G. M. Seagrove, E. G. Smith, F. E. Taylor. *Pharmacy.*—A. J. Pridham, C. A. S. Ridout, A. M. Amsler, J. L. Marshall, A. H. Bostock, R. C. Bowden, C. L. Chalk, H. M. Cruddas, P. G. Harvey, H. W. Henshaw, E. C. Hepper, F. Horridge, T. D. Jago, A. H. John, T. C. L. Jones, E. J. Lindsey, A. E. J. Lister, R. H. Lloyd, W. E. G. Maltby, T. M. Body, T. M. Pearce, J. F. Robertson, E. D. Smith, R. L. Thornley, P. L. Vawdrey, E. Wethered, E. S. Wilkinson, G. S. A. S. Wynne, T. Young, H. N. Marrett, R. Walker, C. Fisher, H. H. Sloane, R. H. R. Whitaker, P. H. Ross. *Elementary Biology.*—R. Thompson, F. J. Wood, W. E. L. Davies, D. S. Sandiland, S. Coram, E. Langworthy.

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SECOND EXAMINATION.—*Anatomy and Physiology.*—W. H. Randolph, A. L. Vaughan, C. V. Cornish, F. C. Borrow, P. Tatchell, H. S. Greaves, J. D. Hartley, T. Neave, J. J. S. Scrose, A. H. Hayes.

* * *

FOUR YEARS' REGULATIONS—FIRST EXAMINATION—*Chemistry.*—A. W. Robertson, R. Cope, L. Galsworthy. *Materia Medica and Pharmacy.*—A. W. Robertson, G. E. French, G. C. Marrack. *Elementary Physiology.*—L. Galsworthy.

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SECOND EXAMINATION—*Anatomy, C.R.V.*—H. Farrington, J. S. Gayner, A. Hawkins. *Physiology.*—C. R. V. Brown, J. S. Gayner.

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FINAL M.R.C.S. AND L.R.C.P.—The following have completed the examination and received their diplomas:—L. B. Rawling, W. R. Gibson, S. P. Huggins, W. N. Barron, G. Smith, C. F. Lillie, A. L. Ormerod, A. B. Tucker, W. M. Macdonald, W. R. Stowe, J. H. F. Nunn, A. M. Crabtree, H. C. Selby, R. de S. Stawell, C. A. Robinson, F. H. Maturin, P. O. Andrew, P. W. Brigstocke, B. W. Holmes, W. R. S. Miller, J. R. Kingdon, T. Compton, T. Hood, S. F. Smith, W. Wrangham, P. A. Palmer, H. L. Lambert, J. H. Dredge, J. B. Greatorex, E. G. Vakley, T. B. Bokenham.

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SOCIETY OF APOTHECARIES OF LONDON—*Surgery.*—T. B. Bokenham, P. M.Brittain. *Forensic Medicine.*—T. Gregg.

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L. T. LAVAN has passed the Final L.D.S.Edin.

New Regulations for Dressers.

It has been resolved—

(i) To reduce the number of Surgery Dressers dressing for the first time to four or five, according to the entry of students, the Surgery Dressers being brought up to the full number of six by the appointment of others who have been both Surgery and Ward Dressers before.

(ii) That a second term of Dressership in the Surgery be allowed as well as a second term in the Wards.

(iii) That Dressing in the Wards and Dressing in the Surgery need not be consecutive (*i.e.* an interval may occur after Surgery Dressing before taking up a Ward Dressership), but that the Surgery dressing be done first.

(iv) That candidates for the post of House Surgeon be required, except under special conditions to be determined upon at the time of nomination, to dress a second time in the Surgery as well as in the Wards.

Obituary.

HENRY MOORE BOWMAN, M.D., M.R.C.P.(Lond.

It is with a feeling of deep regret, which will be shared by all who knew him, that we have to record the sudden death of Dr. H. M. Bowman.

Born in Westmoreland in 1866 and brought up in the quiet atmosphere of a country vicarage, as a boy he acquired a love for the country and its sights and sounds which never forsook him. His knowledge of British birds and butterflies thus early founded was considerable, and he was never happier than when, far away from the bustle and noise of the city, he could follow up his favourite pursuit. He was educated entirely at home, and entered the medical profession probably with no other idea than that of eventually practising in some rural district, where his tastes might have full play. But fate willed it otherwise, and from his first year at Bart.'s, where he entered in 1885, he took a high position among his fellows, and one success after another, though it left untouched the quiet unassuming character which he had always borne, led him to hope that his work in the world might have a wider scope. Though always in the front rank and high up in the prize lists, his first definite success was in 1889, when, besides taking the L.R.C.P. and M.R.C.S., he graduated as M.B.(Lond.), and was awarded honours in Medicine, and the Gold Medal and Scholarship in Forensic Medicine.

In 1890 he gave further proof of his powers by taking the Sir George Burrows Prize in Pathology; and 1891 saw the promise, which the M.B. had given two years previously, confirmed by his qualifying for the Gold Medal in the M.D. examination.

This left no doubt as to the course which he should in future pursue, and he was in 1892 finally stamped as a physician by receiving the M.R.C.P.

His success at these examinations was the more meritorious when it is remembered that he never waited to improve his chance, but was one of the few men of his year who entered for every examination at the earliest opportunity, and from start to finish never had a failure recorded against him.

As House Physician for Dr. Church, and afterwards as Casualty Physician, he gained the goodwill and respect of all with whom he came in contact by his kindly forethought for the feelings of others as well as by the thorough and painstaking manner in which he did his work. When he left Bart.'s for a time to act as House Physician to the National Hospital for the Paralysed and Epileptic in Queen's Square he had made many friends.

Here, as at his old school, he won the affectionate regard of all, and rapidly came to be looked upon as a young neurologist of great promise. Both his seniors and colleagues recognised his merits and highly valued his opinion.

At the time of his death he held the offices of Assistant Physician to the Royal Hospital for Diseases of the Chest in the City Road, and Assistant Demonstrator of Physiology and Pharmacy at St. Bartholomew's, and it was in this latter capacity that most of us knew him best.

Always kind and considerate, ever ready to go out of his way to help those under him, it is not to be wondered at that Bowman was most popular and successful as a teacher.

He was always thoroughly in earnest about anything he undertook; when at work he worked and when at play he played, and this, rather than any special brilliancy, perhaps, accounted for his success.

On July 16th he saw his out-patients at City Road and did his other work, and at night retired to rest apparently in his usual health, but the following morning was found dead in his bed, having passed away quite quietly in his sleep.

A post-mortem examination revealed the fact that he had a large dilated heart, the failure of which had induced a fatal syncope.

From statements he made at various times it would appear that he was conscious of his condition; but, as one would have expected from his nature, he never complained. The knowledge of his uncertain tenure of life, however, in all probability accounted for the shade of melancholy which occasionally possessed him.

The funeral took place at the Great Northern Cemetery, and was largely attended by the inhabitants of New Southgate, where his father is vicar, and by many of his old Bart's friends.

Death at any time must leave mourners, even when it closes a long and prosperous life which has extended to the allotted span of human kind and has left its task complete. But the sudden termination, almost at the commencement, of what gave every promise of being an exceptionally brilliant career is inexpressibly sad.

"The memory of the wither'd leaf
In endless time is scarce more brief
Than of the garner'd Autumn-sheaf"

is a thought which, true as it is, brings little consolation in the present, and those who were first year's men together in 1885, those who worked together on the Junior Staff in 1890, or later as Demonstrators in the Medical School, will feel with sorrow that yet another of that little band, bound together by that common tie, is gone.

Gone before his time, and though others take his post and carry on the work he might have done, a vacant place remains.

Correspondence.

To the Editor of St. Bartholomew's Hospital Journal.

CARBUNCLES AND PLAGUES.

SIR,—In Mr. R. M. West's interesting paper on "Carbuncle," published in last month's JOURNAL, I was surprised to find the following statement. "Most of the so-called 'Plagues' which infested Europe during the Middle Ages, notably the Great Plague of 1665, were characterised by the appearance of carbuncles, or as they were then called 'buboes,' on the body of the patient," and their "appearance . . . . was looked upon as a not entirely unfavourable sign." I must confess curiosity as to the source of Mr. West's information on the identity of carbuncles and buboes. All the authorities, so far as I am aware, if not from Thomas Lodge, the enplurist, at least from Hodges and Heinerbroeck down to Surgeon-Major Colvill and Dr. J. F. Payne, seem agreed that the buboes and carbuncles of Plague are distinct in frequency, position, and prognosis.

In frequency.—While buboes occur in all but the most rapidly fatal cases, carbuncles have only been met with in 2½ to 3 per cent. in the recent epidemics of which we have reliable statistics.

In position.—Buboes usually appear in the lymphatic glands of the groin (45—50 per cent., Payne; 75 per cent., Osler), less frequently in the axilla, and occasionally in the neck; while the favourite sites for carbuncles are the interscapular and gluteal regions.

In prognosis.—While buboes which suppurated early were regarded as a good omen, carbuncles seem always to have been looked upon as a very grave sign.

That the old physicians clearly distinguished between them is also seen in the fact that the favourite treatment for buboes was to "mature" them, and then open as soon as possible, while the actual cautery was frequently recommended for carbuncles. We may fairly regard buboes as typical of Levantine Plague, and carbuncles as merely an occasional complication. Recent autopsies show that the external bubo is only an outward sign of a general glandular affection in which the lymphatic glands may be agglomerated to form masses weighing two pounds.

One of the few living physicians with a personal knowledge of Plague, Dr. Payne, clearly holds these views, and in his most recent utterance on the subject (in Prof. Allbutt's *System of Medicine*) I can only find one remark suggestive of the origin of Mr. West's statement. Occasionally, it seems, the skin over the bubo becomes gangrenous, when the distinction between it and a carbuncle would become obscured. I am, faithfully yours,

W. LANGDON BROWN.

To the Editor of St. Bartholomew's Hospital Journal.

INSTRUCTION IN MEDICAL ETHICS.

DEAR SIR,—Might I suggest that it would be a great advantage for the Senior Students of the Hospital if one or two lectures on the subject of "Medical Ethics and its Allies" were included in the course on the Theory and Practice of Medicine. My reasons for this are, first, that there is a very scanty amount of literature accessible to the student (even if he cares to look for it) on these questions; and secondly, men launched forth from the hospitals into practice are at once confronted with various questions, both of ethics and etiquette, on which they have never thought, and have had no instruction *ex cathedrâ*. It is hardly for me to suggest when or by whom such instruction should be given, but I cannot help thinking that if say two lectures (and possibly these would be enough for practical purposes) were given, one by a consultant, and one by some old and experienced Bart.'s man in general practice—of whom our seniors must know several,—the questions touched on would be treated from both points of view, and it would lend to a continuance of those friendly relations which ought to exist between the two classes of practitioners; and I feel sure that advice from elders in our ranks would be welcomed by many a man. He who is recently qualified knows only too little of these subjects, and of the business side of the profession, and it is likely that many of the elements of discord in our professional life might be removed, if we had, while students, more dogmatic instruction in such matters. I am, dear Sir, yours faithfully,

LEWIS G. GLOVER.

HAMPSTEAD;
August 4th, 1896.

To the Editor of St. Bartholomew's Hospital Journal.

ANNOUNCEMENTS OF COMING EVENTS.

DEAR SIR,—In answer to "A keen old Bart.'s Man" we write to say that the date of our Sports could not be fixed until after the United Sports were arranged; this made it too late for insertion in the May number, and the June number did not come out until after the Sports were over.—Yours,

HON. SECS. ST. B. H. ATHLETIC CLUB.

[This letter was crowded out of the July number.—ED.]

Review.

THE SURGERY OF THE CHEST. By STEPHEN PAGET, M.A.Oxon., F.R.C.S. Price 10s. 6d. net. Bristol: John Wright and Co. London: Simpkin, Marshall, Hamilton, Kent and Co., Ltd.

It will be a matter of surprise to most that there is enough "surgery of the chest" to fill a book of 460 pages. It will be a still greater surprise to find that the subject can be made as full of interest from beginning to end as the book before us is. This is a practically complete record of all surgical work that has been done on the chest from the earliest ages, and in every part of the world, together with the author's own views and the results of his own clinical experience. Though Mr. Paget has treated the subject in an exhaustive and eminently scientific manner, he is yet brief and clear in his style, and any further abridgment must have been attended with loss to the reader.

The book is divided into two parts, the first and shorter part dealing with injuries of the chest, and the second with diseases of the chest. There are twelve plates, drawn from museum specimens, and clearly illustrating various pathological conditions described in the text. These plates, the preface tells us, are the work of the author's wife.

The wealth of clinical record, with the multitudinous references, can hardly fail to make it a standard work. The fair criticism of the often conflicting views of others is evidence of the broad-minded and unbiassed manner in which the author has done his work, and the reader is able to form his own conclusions from the cases cited. To the student, the absence of dogma may perhaps be a little puzzling, but few will consider this a fault.

The treatment of empyema is very fully considered. The author is not in favour of immediate irrigation at the time of operation. He is very definite on this point, and brings much clinical evidence in support of his view. It is interesting to learn that Hippocrates treated empyema by incision, and kept the wound open with either a "strip of linen cloth," or in the later stages a "small rod of metal." In spite of the teaching of Hippocrates the Middle Ages treated empyema by repeated puncture, and within the last twenty years, puncture, repeated even to the hundred and twenty-second time, appears to have been a common treatment. The resulting amyloid disease seems to have been just as common.

The sections dealing with fractures and dislocations affecting the sternum and neighbouring cartilages, hernia of the lung, and diseases of the bronchial glands, are, from the rarity of the conditions described, of considerable interest. We recommend the book to all whose interest lies in Surgery, and can promise that its perusal will bring them not only instruction, but much pleasure.

New Productions.

"*Apenta*" *Water.*—With regard to our remarks in a recent number upon this water, we notice in the *Therapeutische Monatshefte* of June last, a report by Professor Oscar Liebreich, Regius Professor of Chemistry in the University of Berlin. Professor Liebreich, speaking of the necessity for some assurance that the composition of a water used medicinally shall be subject to only slight variations, remarked that it was a "matter for high satisfaction that the aperient water 'Apenta' from the Uj Hunyadi Springs in Ofen has been placed under State control." Variations in the composition of "Apenta" are thus guarded against as far as possible.

Litmus Pencil.—Messrs. Thomas Christy and Co., of 25, Lime Street, E.C., have sent us a novelty in the shape of a pencil, one end of which is composed of red litmus and the other blue. The pencil is made like an ordinary cedar pencil, and sharpened in the usual way. A line is drawn upon a piece of paper either with the blue or the red end, and the paper is dipped in the solution to be tested. The sensibility is greater than that of ordinary litmus paper, and the makers state that their pencil will stand exposure without change. Experiments made by us with the pencil have shown that it is a most satisfactory method of using litmus, and the hardness of the preparation is such that when once sharpened it can be carried in the pocket with very little fear of the point being broken. The price of the pencil is 1*s.* 3*d.*, and one pencil would probably suffice for an almost innumerable number of tests.

Births.

ECCLES.—On July 18th, at Upper Norwood, the wife of H. Annesley Eccles, M.D.Lond., of a son.

POLLARD.—On July 26th, at Tollesbury, Essex, the wife of W. H. Pollard, M.B., of a son.

BATTEN.—On July 21st, at Campden Lodge, W., the wife of Rayner D. Batten, M.D., B.S.(Lond.), of a daughter.

MASTERMAN.—On July 5th, at Bludan, Syria, the wife of Ernest W. Gurney Masterman, F.R.C.S., F.R.G.S., of Damascus, of a daughter.

REECE.—On July 19th, at 31, Holland Villas Road, W., the wife of Richard J. Reece, M.D., of a daughter.

Marriage.

READ—HUDSON.—On May 23rd, 1896, at All Soul's, Langham Place, by the Rev. Canon Acheson, Henry G. Read, M.R.C.S., L.R.C.P., L.S.A., L.D.S., of 1, Portland Place, W., eldest son of Mr. H. B. Read, of 30, Finsbury Square, E.C. and Martins Shipbourne, Kent, to Sarah Theresa Hudson, of Barling House, Barling, Essex.

Death.

ECCLES.—On July 21st, at Upper Norwood, Mary Sophia, the beloved wife of H. Annesley Eccles, M.D.Lond., of nephritis.

ACKNOWLEDGMENTS.—*Guy's Hospital Gazette, St. Thomas's Hospital Gazette, St. George's Hospital Gazette, St. Mary's Hospital Gazette, London Hospital Gazette, The Nursing Record, The Hospital, The Charity Record.*